INFORMATION OF MINIMUM REQUIREMENTS TO BE PROVIDED FOR STARTING POSTGRADUATE DEGREE / DIPLOMA COURSES IN MEDICAL COLLEGES AS PER M.C.I. GUIDELINES (FOR CLINICAL COURSES)

1.	Name of the Department	:	Orthopaedics
2.	P.G. Courses intending to start P.G. Degree/ P.G Diploma	:	
3.	Name of the Head of the Department	:	
4.	Bed Strength (Department)	:	Male: Female:
	A. Total No. of Beds		Children
	B. Free Beds Paying		
	(For starting P.G. Courses in General Surgery, General medicine, Obst. & Gynaec., should have 60 beds, other departments (clinical) should have minimum of 30 beds)		
5.	No. of Units (Unit should have minimum 30 beds & three members of Faculty)	:	
6.	Services		
A.	Out Patient	:	
	 No. of out patient treated per annum (last one year) No. of Emergencies (if any). 	:	
		:	
В.	In patient	:	
	 No. of admissions. No. of Surgeries. 	:	
	Elective Emergency	:	
7.	Facilities:	:	
А.	Infrastructure:		
	a) OP Area for out Patients	:	
	b) Inpatients / wards / units	:	
	c) Staff rooms	:	
	d) Cubicale) Demo. rooms	:	
	f) Waiting Area	•	
	g) Necessary equipment provided for the above	•	

SIGNATURES OF THE INSPECTION COMMITTEE:

	Whether the above are provided. In addition to UG Courses in the college. (If so furnish No. of rooms.)	:	Yes / No
B.	O.P. & I.P. Supportive Services.	:	
	Lab services, Biochemistry, Microbiology, Pathology, Radiology, Physiotherapy, Pharmacology, Ambulance etc.,		
C.	Equipment:	:	
i)	Basic equipment in the department	:	
ii)	Latest equipment (specify) in the department (list to be enclosed).	:	
	Whether equipment in addition to UG Course are provided. (if necessary)		
D.	Library : No. of titles	:	
	No. of books	:	
	No. of journals	:	
	(International & national)		
	The No. of books additionally provided for PG	:	
	Programme in the Department.		
	1) in Departmental library		
	2) in central library		
	Whether Computer with Internet facility is		
	provided.		
E.	Teaching aids: Audiovisual	:	
	Xerox,	:	
	Video etc.	:	
8.	Other facilities needed for the specialty:	:	
	Whether in the following, required for department are available:		Yes / No
	O.T., ICU, AMC, ASC, Central sterilization, etc.		
9.	Teaching faculty:	:	

	Teaching Faculty	Required	Available	Deficiency
i)	A. Professors			
	B. Associate Professors			
	C. Readers			
	D. Asst. Professors			
	E. Tutors / Demonstrators			

SIGNATURES OF THE INSPECTION COMMITTEE:

(1)

Non-teaching and Technical	Required	Available	Deficiency
F. Technicians			
G. Storekeeper–cum-clerk			
H. Lab Attendants			
I. Steno-cum-Typist / computer operator			

ii) Total No. of Recognized Postgraduate : Teachers:

(A. Qualified in specialty, 8 years experience of which atleast 5 years of teaching experience is as Asst. Professor or above gained after attaining the PG Degree shall be recognized as Postgraduate Teachers)

10. Teaching faculty particulars

:

:

:

S.No.	Name	Design.	Qualifi- cation	Year of Passing of PG	Date of appointment	Teaching experience after PG	Publications
				Course			

- 11. Signature of H.O.D.
- 12. Recommendations (in-take)
- A. P.G.Teacher: student ratio 1:2 for a professor : & 1:1 for other cadres in each unit per year subject to maximum of 4 PG seats including diploma per unit per academic year provided a complement of 10 teaching beds is added to the prescribed bed strength of 30 for the unit as per MCI.,

SIGNATURES OF THE INSPECTION COMMITTEE:

CERTIFICATE

- a) Whether necessary infrastructure, equipment, i) Satisfactory books, furniture etc., are provided for PG Courses in addition to MBBS Programme.
- b) Whether teaching staff; non-teaching & : technical staff are appointed for PG Programme in addition to MBBS Programme.
- c) Number of PG Degree, Diploma seats recommended taking into consideration of the permission issued by GOI.,
- 13. Remarks (If any)

- ii) Not satisfactory
- i) Appointed ii) Not appointed.
 - PG Degree : PG Diploma :

SIGNATURES OF THE INSPECTION COMMITTEE:

(1)

(2)

Standard Inspection Form for Postgraduate courses (Orthopaedics)
1. Name of Institution:
Annual Intake for U.G.:
Reference:
2. Particulars of the Inspector:- Inspection Date
Name
Designation
Speciality
Name & Address of Institute/College
••••••
Residential Address
(with Pin Code)
Phone
(Off)
(Resi)
(Fax)
Mobile No
E-mail:

Signature of inspector

3. (Institutional Information)

A). Particulars of college

Item	College	Chairman/Health Secretary	Dean	Medical Superintendent
Name				
Address				
State				
Pin Code				
Phone (Off) (Res) (Fax)				
Mobile No.				
E.mail:				

B). Particulars of Affiliated University

Item	University	Vice Chancellor	Registrar
Name			
Address			
State			
Pin Code			
Phone (Off) (Res) (Fax)			
Mobile No.			
E.mail:			

Signature of Dean/Principal

4. Details of PG courses and their sanctioned intake by MCI:

Department	Course	rse Sanctioned seats			
		Pern	nitted	Recog	gnized
		When	No. of Seats	When	No. of Seats
Diploma in Anesthesia	Diploma		Beats		Deals
Diploma in Child Health	Diploma				
Diploma in Community Medicine	Diploma				
Diploma in Clinical Pathology	Diploma				
Diploma in Diabetology	Diploma				
Diploma in Forensic Medicine	Diploma				
Diploma in Health Administration	Diploma				
Diploma in Hospital Administration	Diploma				
Diploma in Health Education	Diploma				
Diploma in Obstetrics & Gynaecology	Diploma				
Diploma in Industrial Hygiene	Diploma				
Diploma in Immuno-Haematology and Blood Transfusion	Diploma				
Diploma in Oto-Rhino-Laryngology	Diploma				
Diploma in Radio-Diagnosis	Diploma				
Diploma in Radio Therapy	Diploma				
Diploma in Medical Virology	Diploma				
Diploma in Occupational Health	Diploma				
Diploma in Ophthalmology	Diploma				
Diploma in Orthopaedics	Diploma				
Diploma in Public Health	Diploma				
Diploma in Physical Medicine & Rehabilitation	Diploma				
Diploma in Psychological Medicine	Diploma				
Diploma in Radiation Medicine	Diploma				
Diploma in Sports Medicine	Diploma				
Diploma in Tuberculosis & Chest Diseases	Diploma				
Diploma in Tropical Medicine Health	Diploma				
Diploma in Dermatology, Venereology and Leprosy	Diploma				
Diploma - Aviation Medicine	Diploma				
Diploma in Cardiology	Diploma				
Diploma in Microbiology	Diploma				
Diploma in Industrial Health	Diploma				
MD – Anaesthesiology	MD				
MD/MS - Anatomy	MD				
MD - Aviation Medicine/Aerospace Medicine	MD				
MD - Bio-Chemistry	MD				
MD - Bio-Physics	MD				
MD - Forensic Medicine	MD				
MD - General Medicine	MD				
MD - Community Health Administration	MD				
MD - Geriatrics	MD				
MD - Hospital Administration	MD				
MD - Health Administration	MD				
MD - Microbiology	MD				
MD - Nuclear Medicine	MD				
MD/MS - Obstetrtics & Gynaecology	MD				
MD - Paediatrics	MD				
MD - Pathology	MD				
MD - Dermatology , Venereology & Leprosy	MD				
MD - Pharmacology	MD				
MD - Physiology	MD				
MD - Physical Medicine & Rehabilitation	MD				
MD - Psychiatry	MD				
MD - Radio Diagnosis/Radiology	MD				

MD - Radiothrapy	MD		
MD - Social & Preventive Medicine /	MD		
Community Medicine			
MD - Tuberculosis & Respiratory Diseases /	MD		
Pulmonary Medicine		 	
MD - Immuno Haematology & Blood	MD		
Transfusion	MD	 	
MD - Tropical Medicine		 	
MD - Pulmonary Medicine	MD	 	
MD - Sports Medicine	MD	 	
MD - Family Medicine	MD		
MS - Orthopaedics	MS		
MS - ENT	MS		
MS - General Surgery	MS		
MS - Ophthalmology	MS		
DM - Neurology	DM		
DM - Rheumatology	DM		
DM - Endocrinology	DM		
DM - Clinical Pharmacology	DM		
DM - Clinical Haematology	DM		
DM - Pulmonary Medicine	DM		
DM - Neuro Radiology	DM		
DM - Nephrology	DM		
DM - Neonatology	DM		
DM - Oncology	DM		
DM - Gastroenterology	DM		
DM - Cardiology	DM		
DM - Clinical Immunology	DM		
DM - Pul. Med. & Critical Care Med.	DM		
DM - Cardiac-Anaes.	DM		
DM - Haematology Pathology	DM		
DM - Medical Genetics	DM		
M.Ch - Cardio Thoracic and Vascular Surgery	MCh		
M.Ch - Neuro Surgery	MCh		
M.Ch - Paediatric Surgery	MCh		
M.Ch - Plastic Surgery	MCh		
M.Ch - Surgical Gastroenterology	MCh		
M.Ch - Surgical Oncology	MCh	 	
M.Ch - Urology/Genito-Urinary Surgery	MCh		
M.Ch - Endocrine Surgery	MCh		

<u> PART – I</u>

- 5. Department inspected:
- 6. Particulars of HOD
 - Name:
 - Age :
 - PG Degree { University Institution Year
 - Total teaching experience(give details)
- 7. Previous inspection of department by MCI, if any:-
 - Date
 - Purpose, (for starting/increase of seats/ for recognition)
 - Deficiencies pointed out, if any.
- 8. Purpose of present inspection:
 - Starting of PG.. Degree/diploma/both.
 - Increase in seats...Degree/Diploma/both.
 - Recognition /approval of degree/diploma/ both.
 - Whether the course was started with prior approval of MCI.
 - Date of permission of MCI for Degree/ Diploma/ both
 - Annual intake Sanctioned by MCI for degree/ diploma/both
 - Date of first admission for Degree/diploma/both
 - Date of examination of Ist batch for recognition of course
- 9. Mode of selection (actual/proposed) of PG students.

10. If course already started, yearwise number of PG students admitted and available PG teachers during the last five years.

Year	Names of PG stude	nts admitted	Names of recognized PG teachers		
	Degree	Diploma	against whom the students were admitted.		

11. Central Library:

- Total No. of Books.
- Books pertaining to Orthopedics
- Purchase of latest editions in last 3 years.

Orthopedics Books	Other Books

• Journals:

	Total	Orthopedics
Indian		
Foreign		

- Year/month upto which Indian Journals available
- Year/ month upto which Foreign journals available.
- Internet /Medlar/ Photocopy facilities available/ not available.
- Library opening timings:
- Reading facility out of routine library hours

12. Hostel facilities: Accommodation (No. of rooms) available for

- For U.G. students
- For Interns
- For P.G. students

13. Ethical Committee (Constitution)

14. Medical Education Unit (Constitution).

(Specify number of meetings of these bodies held annually & minutes thereof)

15. Emergency/ Casualty

Department

- Available Space
- No. of beds
- Equipment(s)
- Available staff (Medical/Paramedical)
- No .of cases (Average daily attendance of patients).
- Investigative facilities available (round the clock).
- Facilities available

16. Blood bank

• Valid License :

Yes/No

- No. of blood units available:
- Average blood units consumed daily:
- Facilities of blood components available: Yes/No
- Nature of Blood storage facilities (Whether as per specifications). Yes/No
- All blood Units tested for Hepatitis C,B,HIV: Yes/No

17. Central Laboratory

- Controlling Department.
- Working Hours.
- Investigative work load.

18. Central Research Lab.

- Whether there is any Central Research Lab.
- Administrative Control
- Staff
- Equipment
- Work load.

19. Investigative facilities (Approx. number of investigations done daily)

- I. Radiology
 - Plain X-rays:
 - CT Scan;
 - MR Scan
 - Mammography
 - Ba Studies/IVP
 - Ultra-sonography
 - Others.

- III. Pathology
 - Haematology
 - Histopathology
 - FNAC
 - Cytology

IV. Microbiology

- Bacteriology
- Serology
- Mycology
- Parasitology
- Virology
- Immunology

V. Biochemistry

- Blood Chemistry
- Endocrinology
- Other fluids
- 20. Operation Theatres: (Mention only the operation theatres available for Orthopedic surgery department)
 - AC/Non AC
 - Numbers:
 - Equipment(s)
 - Pre-Anaesthetic Clinic
 - Post-anaesthetic care area.
 - Resuscitation arrangement adequate/ inadequate
 - ICU
 - Pain Clinic
 - Total Anaesthesia staff
 - No. of days operation carried out
 - Average No. of cases operated daily

Major Minor

21. Central Supply of Oxygen/Suction: Available/ Not available.
22. Central Sterlization Deptt. Adequate/ Not adequate
23. Laundary : Mannual/ Mechanical. Service: Adequate/Inadequate. 24. Kitchen

Available/ Not available

Cooking by Gas/Wood

25. Incinerator

- Available/ Not available.
- Functional/ not functional
- Capacity

26. Generator Facility: Available/ Not available. Capacity:

27. Medical Record Section: Computerized/ Not computerized.

- 28. Recreational facilities:
 - Play grounds.
 - Gymnasium
 - Auditorium

PART – II (Departmental Information)

General Departmental facilities:

- Total no. of beds in the department.
- No. of Units in the department.
- Unit wise teaching Resident staff (Annexed)

Note: Unit wise teaching Resident Staff should be shown separately for each unit on a separate page.

Unit _____

Unit wise teaching Staff:

Bed strength _____

S. No.	Designation	Name with Date of Birth	Nature of employment	ent /part		ΓΙΟΝ	Experience Date wise teaching experience with designation & Institution				
110.			Full time/part time/Hon.								
				Subject with Year of passing	Institution	University	Designation	Institution	From	То	Period

1. List of Non-teaching Staff: -

S.No.	Name	Designation

2. Available Clinical Material:

- Average daily OPD.
- Average daily IPD.
- Average daily bed occupancy rate:
- Average daily operations: Major Minor
- Year-wise available clinical materials (during previous three years).

Whether these figures are commensurate with the number of investigations and blood units consumed daily. Yes/No

3. Intensive Care facilities

- I. ICU
- No. of beds
- Equipment
- Average bed occupancy
- II. ICCU
- No. of beds
- Equipment
- Average bed occupancy
- 4. Specialty clinics and services being provided by the department.

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5. Teaching facilities:

	Number	Size	Sitting capacity
Seminar Rooms			
Demonstration Rooms			

Audiovisual Aids: Adequate / Inadequate.

6. Departmental Library:

- Total No. of Books.
- Purchase of latest editions in last 3 years.

7. Departmental Museum (Wherever applicable).

- Space:
- No. of specimens
- Charts/ Diagrams.
- 8. Departmental Research Lab.
 - Space
 - Equipment
 - No. of publications from Indexed Non-indexed. the department during the last three years.

9. Working Ward Side lab.

- Space
- Facilities
- Departmental Technicians

10. OPD Space:

- No. of rooms
- Patient Exam. arrangement: Adequate/ Inadequate
- Teaching Space Adequate / Inadequate
- Waiting area for patients. Adequate / Inadequate
- Indoor Space: Adequate / Inadequate
- 11. Office Accommodation:
 - Departmental Office
 - Space
 - Staff (Steno /Clerk).
 - Computer/ Typewriter:

Office Space for Teaching Faculty:

- HOD
- Professor
- Assoc. Prof./ Reader
- Lecturer/ Asstt. Professor
- Resident duty room

12. Equipments:

List of important equipments available and their functional status.

13. Whether the following facilities are available or not in the department.

(a) Plaster room	Functional/ Non-functional
(b) Fracture Clinic	Functional/ Non-functional
(c) Arthroscopy	Functional/ Non-functional
(d) Joint replacement facilities	Functional/ Non-functional
(e) Physiotherapy Section.	Functional/ Non-functional

(f) Facilities for occupational therapy (artificial limbs, braces, shoes).

Functional/ Non-functional

(g) Investigative facilities like Nerve conduction, EMG etc. Functional/ Non-functional

14. Clinic Pathological conference

15. List of publications from the department during the last 3 years in indexed and non-indexed journals.

PART III

POSTGRADUATE EXAMINATION

- 1. Minimum prescribed period of training.
- 2. Minimum prescribed essential attendance.
- 3. Periodic performance appraisal done or not?
- 4. Details of examiners appointed by Examining University.

5. Whether appointment of examiners & conduct of examination as per prescribed MCI norms or not ?

Signature of Inspector

Summary of Inspection report – (check list) to be completed by the Inspector.

Date of inspection:-

Name of Inspector:-

	Name of the institution		Name and other particulars of Institution			
			(Dean/Director)			
				PG degree:Recognized/Non-R		
				Experience:Adequate/Inadequate		
				Age: Below/above 65 years		
2	Department Inspected		Name & other particulars of Head of Department			
				PG degree:Recgonised Non-R		
				Experience:Adequate/Inadequate		
				Age:Below/above 65 years.		
3	Date of last inspection	of the Depart	ment (with Repor	rt):		
	Number of UG admissi year	on every				
	Staff position for UG		Sufficient/Insu	fficient		
	Other deficiency, if any	7	Yes/No			
				qualifications & Experience		
	Designation	Number	Name	Total Experience		
	Professors					
	Addl. Professors					
	Assoc.					
	Professors/Readers					
	Asstt. Professors					
	All teachers should bDetailed proforma	1 • •		respect of every teacher must b		
	- Detailed proforma obtained which signed	(with photograd by the conc	raph affixed) in erned teacher, HO	respect of every teacher must b D and Head of institution working in any other institutio		
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10	Year-wise number of PG students admitted and available staff during the last 5 years	Year	No. of PG students admitted (Deg/Dip)	No. of recognized PG teachers in the department
	2002			
	2001			
	2000			
	1999			
	1998			
11	Other relevant facilities in the Institution			
	Radiology facilities	Adequate/Inadequate		
	Bio-Chemistry facilities (24 hrs emerged	Adequate/Inadequate		
	Pathology & Microbiology facilities	Adequate/Inadequate		
	Blood Bank facilities (24 hours open o components available)	Adequate/Inadequate		
	Incinerator	Adequate/Inadequate		
	Laundry	Adequate/Inadequate		
	Hostels for UG & PG students	Adequate/Inadequate		
	Accommodation for Staff	Adequate/Inadequate		

12. **Final remarks by the Inspector:** (No recommendations regarding permission/recognition be made) Give factual position only).

Signature of the Inspector

Note : Specific mention of required facilities as per MCI norms and commensurate with the degree under consideration must be made specifying whether these are Available/Not available.